PTO/SB/06 (08-01) Approved for use through 7/31/2008. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN (Column 1) (Column 2) SMALL ENTITY OR SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA BASIC FEE (37 CFR 1.16(a)) RATE FEE RATE FEE TOTAL CLAIMS (37 CFR 1.16(c)) OR minus 20 = INDEPENDENT CLAIMS OR (37 CFR 1.18(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR 'Il the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II (Column 1) (Column 2) OTHER THAN (Column 3) OR SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE 19/05 ADDÍ RATE **AFTER** PREVIOUSLY **1**001-ETTRA TION AMENDMENT ONAL FEE PAID FOR ENDME FE Minus (37 CFR 1.16(c)) OR Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d) OR TOTAL TOTAL ADD'L FEE OR ADO'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE ADDI-ENT RATE 06 AFTER PREVIOUSLY ADDI-**EXTRA** TIONAL AMENDMENT PAID FOR TIONAL FEE Minus FEE Total AMENDM ચ (37 OFR LIBELI) x <u>\$25</u> = x \$ 50 = OR Independent (37 CFR 1.16(b)) Minus \_ 6 t/2 x x s200 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) +s/80 = \_۵ کارۍ + OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE ADDI-AMENDMENT RATE **AFTER** ADDI-PREVIOUSLY **EXTRA** TIONAL AMENDMENT PAID FOR TIONAL FEE Total (37 CFR 1.16(c)) FEE Minus OR Independent (37 CFR 1,15(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d)) OR TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.15. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			23					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			23 minus 20=		• 3,			X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	3 mi	nus 3 =	2/			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	1	TOTAL	402	OR	TOTAL		
CLAIMS AS AMENDED - PART II											OTHER	THAN	
		(Column 1)		(Colur		(Column 3)	<u> </u>	SMALL E	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9= ,		OR	X\$18=		
	Independent	* NTATION OF MI	Minus	***	CLAIM	=	┨╏	X42=		OR	X84=		
			JEHN CE DEN	LIVOCIVI	CEAN		J	+140=		OR	+280=		
								TOTAL ADDIT, FEE		OR	TÖTAL ADDIT, FEE		
		(Column 1)		(Colun	nn 2)	(Column 3)					ADDII. 1 CC		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***			]	X42=		OR	X84=		
	FIRST PRESE	JLTIPLE DEF	ENDENT	CLAIM		┨┠			On				
						•	L	+140=		OR	+280=		
							A	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	,	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	]	X42=			X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL						J ├			OR	7.5-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.*  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
***	f the "Highest Nu	mber Previously Pa ber Previously Pai	id For IN THI	S SPACE is	less tha	n 3, enter "3,"	_	_		•			